

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

NOV 30 2009

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:		DataMaster cdm S/N	130174
Name		GARY LOWE	ID# 7219 Date 11/20/2009
A	Agency	HAINES PD	Phone # 766-2121
Instrument Location		HAINES P.D.	
Alco S/N		X124631	Target Value .082 High Pressure 600
Alco Test Values		.081 1 st Alco	.080 2 nd Alco
Signature		GARY LOWE	12/4/09
(OVER)			

(Do Not write in the area below)

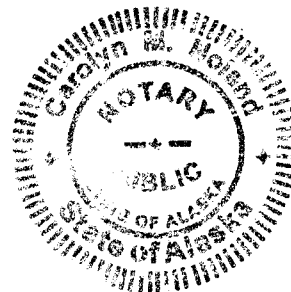
I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 20th day of Dec, 2009.

Carolyn M. Noland
Notary Public, State of Alaska
Commission Expires with Office



VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N

130174

(CONTINUED FROM FRONT PAGE)

C

TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130174

NOVEMBER 20, 2009

OPERATOR'S NAME:

LOWE, GARY

OPERATOR'S NUMBER: 7219

SUBJECT'S LAST NAME:

TEST

SUBJECT'S FIRST NAME/NI:

ALCO

O.L. #: 12345

DEPT/AGENCY: HNS1

CASE/REPORT: 11/20/2009

TEST TYPE: U

ALCO TARGET VALUE: .002

ALCO S/N: X124631

--- BREATH ANALYSIS ---

.002 ADJUSTED FOR 29.60 in	.001	00:49
ALCO TARGET	.000	00:49
BLANK TEST	.000	00:50
INTERNAL STANDARD	VERIFIED	00:50
ALCO TU 29.60 in	.001	00:50
BLANK TEST	.000	00:51
SUBJECT SAMPLE	.000	00:51
BLANK TEST	.000	00:52
ALCO TU 29.60 in	.000	00:52
BLANK TEST	.000	00:53

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130174

NOVEMBER 20, 2009
TIME 08:46

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

SOFTWARE DATE: 01/08/09

HEATERS

SAMPLE CHAMBER: 49c

BREATH TUBE: 41c

BAROMETER: 29.62 in

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=?@ABCDEFGHIJ
KLMNOPQRSTUVWXYZ[\]^_`abcdefgijklmnop
qrstuvwxyz{|}~